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REFLECTION ON COVID-19 PANDEMIC AND CRISIS MANAGEMENT IN TOURISM

REFLEXIÓN SOBRE LA PANDEMIA DE COVID-19 Y GESTIÓN DE CRISIS EN EL TURISMO

Mariana De Oliveira Castanhas Casal Ribeiro Universide de Lisboa. <u>mariana.ribeiro2@edu.ulisboa.pt</u> <u>https://orcid.org/0000-0002-4854-2736</u>

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ABSTRACT

The contemporary history of tourism has been shaken by different types of crises as natural disasters, economic crises, terrorist attacks and pandemics, resulting in economic, political and social implications that impact the tourist destination, the volume and direction of tourist flows. In early 2020, COVID-19 took the world by surprise, causing a worldwide pandemic in just a few months. The dimension of this outbreak coupled to the mobility that characterizes tourism in the Anthropocene, now raises a need for reflection on the arising and control of future pandemics. Several models of crisis management in tourism are presented in the scientific literature, however, all of generalist nature. It is urgent to examine and refine the existing crisis management models, since the models already developed have little specificity in the theme of pandemic crisis management in tourism.

KEYWORDS

COVID-19; Crisis Management; Pandemics; Tourist Destinations

CONTENTS

1. Introduction. 2. The context of Crisis and Tourism. 3. Crisis Management Models in Tourism. 4. The Pressure of Anthropogenic Pandemics in Tourism. 5. The COVID-19 and Future Outlines for Crisis Management in Tourism 6. References

RESUMEN

La historia contemporánea del turismo ha sido sacudida por diferentes tipos de crisis, como los desastres naturales, las crisis económicas, los ataques terroristas y las pandemias, lo que resulta en implicaciones económicas, políticas y sociales que afectan al destino turístico, al volumen y a la dirección de los flujos turísticos. A principios de 2020, la COVID-19 tomó al mundo por sorpresa, causando una pandemia mundial en solo unos meses. La dimensión de este brote, unido a la movilidad que caracteriza al turismo en el Antropoceno, plantea ahora la necesidad de reflexionar sobre la aparición y el control de futuras pandemias. Varios modelos de gestión de crisis en el turismo se presentan en la literatura científica, sin embargo, todos de carácter generalista. Es urgente analizar y depurar los modelos de gestión de crisis existentes, ya que los modelos ya desarrollados tienen poca especificidad en el tema de la gestión de crisis pandémicas en el turismo.

PALABRAS CLAVE

COVID-19; Gestión de Crisis; Pandemias; Destinos Turísticos

SUMARIO

1. Introducción. 2. El Contexto de Crisis en Turismo. 3. Modelos de Gestión de Crisis en el Turismo. 4. La Presión de las Pandemias Antropogénicas en el Turismo. 5. El COVID-19 y Esbozos Futuros para Gestión de Crisis en el Turismo. 6. Bibliografía.

1. INTRODUCTION

The social and ecological changes in the Anthropocene are driving the emergence of new pandemics, threatening the global economy and human lives (Zheng et al., 2021). No tourist destination is immune to such future events, placing tourism under constant threat (Pforr & Hosie, 2008; De Sausmarez, 2004). It is important to analyse how pandemics are studied and managed by the tourism literature. In this context, this paper aims to explore the literature on crisis management in tourism with a focal point on the COVID-19 pandemic. Towards a better understanding of the roots of COVID-19, a discussion about the emergence of anthropogenic pandemics and its impacts on tourism is presented. The COVID-19 pandemic is now the trigger point for a critical reflection on existing crisis management models in tourism literature and the development of pandemic management strategies suitable for resilient tourist destinations. It is hoped that this paper will provide a benchmark of current understanding and contribute to the development of future crisis management models more adapted to pandemic crises in tourism.

2. THE CONTEXT OF CRISES IN TOURISM

The term "crisis" is usually applied in different scenarios in tourism as in natural disasters, economic crises or pandemics, resulting in a lack of precision in terms of scientific literature (Laws & Prideaux, 2005). Therefore, the authors tried to broadly define crisis as an event of small or large scale that disturbs the well-organize operation of the tourism industry, threatening their stability. It is important to considerate the probabilistic component and the event's unknown element, as a crisis it is also a: "low-probability, high-consequence event that develops very rapidly and involves ambiguous situations with unknown causes and effects (Robert et al., 2007:109)".

Faulkner (2001) noted that the disturbing event might originate outside the tourist system or represent an extension of the system itself, distinguishing for the first time a crisis from a disaster. Thus, a crisis is then a partially self-inflicted event in the system, resulting from prolonged structural problems, management failures or inadequacy to change as, for example, an economic crisis. The United Nations World Tourism Organization (UNWTO) itself expressed its concern about the unfitting management of crises that affect the tourism industry, creating a set of guidelines for professionals, governments and destinations (UNWTO, 2003). A disaster, on the other hand, results from a shock between the tourist system and rapid and unexpected catastrophic changes, over which it has little or no control as, for example, a pandemic caused by a new virus (Faulkner, 2001). Ritchie (2004) categorized crises and disasters identified in the literature into groups by different criteria:

level of uncertainty, scale and geographical dimension, temporal dimension, level of threat, extent and potential impact and the degree of control and response.

In the case of a tourist destination, crises and disasters directly and indirectly impact tourism, both in terms of tourism supply and demand. Financial and economic crises can weaken the income and capacity of tourism demand, while pandemic outbreaks and natural disasters cause direct impacts on tourist destinations and flows (Faulkner, 2001). From a macroeconomic perspective, crisis and disasters cause a decrease in tourist numbers, triggering a fall in private sector profits and, possibly, interruption of new investments in the destination (Laws & Prideaux, 2005). Crises and disasters are not linear (Pennington-Gray, 2018), but chaotic situations between human and non-human systems, as suggested by complexity or chaos theory (Ritchie & Jiang, 2019; Faulkner, 2001). Their impacts on tourism may be complex, depending on their nature, magnitude and scale (Backer & Ritchie, 2017). By consequent, the boundaries between human activity and rise of new crises are becoming more difficult to identify, due to their increasing complexity (Ritchie, 2004). The complexity between systems is easily evident in the case of the foot-and-mouth outbreak in the United Kingdom, which started as an agricultural crisis and, due to the way it was managed, ended up becoming a crisis for the tourism industry across the country (Miller & Ritchie, 2003). In the end, destinations and tourism stakeholders have a short window period to control the event, recover losses and restore order.

3. CRISIS MANAGEMENT MODELS IN TOURISM

The tourism industry is not well prepared to manage crises and disasters (Wang & Ritchie, 2012). However, a well-structured crisis management is essential to boost the preparedness of destinations to effectively mitigate the impacts and accelerate the destination recovery. As crisis management is contemplated as a process, instead of a one-shot operation (Cioccio & Michael, 2007), a number of crisis management models and frameworks have been researched by tourism literature over the years.

Faulkner (2001) shaped the first model of disaster management exclusively for the tourism industry. Resulting from an analysis of crisis management strategies developed in other disciplines and a comparative study of disasters that occurred, the author created an important model for analysing different tourism disasters and management strategies. Six sequential phases have been identified -pre-event, prodromal, emergency, intermediate, long-term recovery, resolution- with each phase covering key elements for efficient disaster management response and recovery. Faulkner's model has been tested in Bali Bombing terrorist attack and in a flight crash of Singapore Airline (Henderson, 2003a, 2003b). Henderson (2003b) argued that identifying threats for terrorist attacks and the time available to avoid a plane crash are variables somewhat intangible, blended the first three phases of Faulkner's (2001) framework into event phase of crash. In the same year, Faulkner's model was also applied to a health crisis, the outbreak of Food and Mouth disease in the UK (Miller & Ritchie, 2003). It was noticed that in that case the prodromal phase was very short, giving no time to prepare for an imminent crisis. A more recent study divided the long-term recovery stage of Faulkner's model into three sub-stages: (1) infrastructure recovery, (2) individual firms and tourism organizations marketing response and (3) system adaptation (Scott et al., 2008).

Just three years later, Wilks & Moore (2004) framed crisis management into four distinctive phases – reduction, readiness, response and recovery – by presenting the "Four Rs" framework of crisis management. The authors argue that the focal point for a successful crisis management must be an effective preparedness during the first two phases by creating crisis awareness, crisis plans and safety procedures, which will be successfully implemented in the last two phases. Industry associations as Pacific Asia Travel Association have already implemented the "Four Rs" framework to bring forth practical guidelines of how to manage a crisis (Wilks & Moore, 2003). In the same line of thought, De Sausmarez (2004) indorses a crisis management policy grounded on proactive crisis management during the pre-crisis period over post-crisis response. Therefore, crises may be anticipated by continuum risk assessments, identifying sources of greatest risk, tracking risk indicators and developing crisis plans ready to be implemented. This is also reinforced by a growing literature tying the important role of crisis prevention (Donohoe, Pennington-Gray, & Omodior, 2015; Becken & Hughey, 2013).

Ritchie (2004) designed a crisis management model for both disasters and crises in tourism by analysing these events in a holistic way. Ritchie's model keeps the six sequential phases of Faulkner's model, yet adds an element of flexibilization to all six phases, by considering the unique characteristics of each event, such as its typology or its duration. With this encouragement to modify models, researchers have attempted to develop more accurate models from various perspectives.

For Ketter (2016) preventive and inclusive measures must be created in order to be able to safeguard and reinforce the public image of destinations, in the long-term recovery phase. Using the theory of image repair, destinations will thus be able to manage the destination image during crisis and reinforce the image before the crisis.

Stafford et al. (2002) recommended a response-recovery model for malevolence-based crisis as terrorist attacks, while Paraskevas and Arendell (2007) suggested a detailed anti-terrorism model grounded on a strategic crisis management approach (Ritchie, 2004).

Scott et al. (2008) outlined that recovering from a crisis demands only a sequence of curative steps to restore balance, by dividing the long-term recovery phase of Faulkner's model into three sub-phases: (1) infrastructure's recovery, (2) marketing response by companies and tourism stakeholders, and (3) system adaptation.

Pennington-Gray's (2014) developed a framework for studying the impacts of disasters in destination context, while Avraham's (2015) added the effect of sensationalist media for impacting destination images after crises.

Several authors such as Brown et al. (2017) corroborate Ritchie's crisis management model. On the other hand, Speakman & Sharpley (2012) point out limitations to Ritchie's model, by deconstructing the principle that crises follow a sequential life cycle and recommending the use of alternative models, based on complexity and chaos theory, to better analyse crisis events in tourism and, even, pandemic crises. The complexity theory states that the chaos resulting from periods of stability is an intrinsic and potentially beneficial aspect to any tourism system (Kaklauskas et al., 2009). This process is relevant for helping destinations to reinvent themselves and, therefore, plays an important role in the life cycle development of tourist destinations (McKercher, 1999).

Although disaster and tourism crisis models have been researched, they have had few empirical tests and modifications so far (Ritchie & Jiang, 2019). At this time, no model has been developed or adapted to fit pandemic crises in tourism. In summary, to this day Ritchie's model remains the most studied framework to systematically investigate crisis management processes in tourism (Pforr & Hosie, 2008).

4. THE PRESSURE OF ANTHROPOGENIC PANDEMICS IN TOURISM

Many crises have hit tourism over the past hundreds of years. However, epidemic and pandemic outbreaks are one of the greatest threats of the 21st century to the well-being of societies and tourism (Hall et al., 2020; Scott & Gössling, 2015; Page & Yeoman, 2007). Despite this growing threat and the increasing research on crises in tourism, the academy's focus of study continues to fall on economic crises, rather than studying pandemic and health-related crises (Jiang et al., 2017). Mair et al. (2014) identified that in sixty-four studies carried out between 2000 and 2010, only four analysed health-related crises in tourism.

It must be asked why pandemic outbreaks pose a threat to modern societies and tourism sector in the 21st century? Paul Josef Crutzen & Eugene Stoermer introduced us the notion of Anthropocene, to highlight the global impacts of present-day human activities and to prove that the emergence of new pandemics outbreaks are not natural phenomena, but complex events (David et al., 2021). Anthropocene is well defined in the literature as: "[...] the proposed name for a new geological epoch demarcated as the time when human activities began to have a substantial global effect on the Earth's systems (Whitmee et al., 2015:1975)".

In this new era of the Anthropocene, pandemics are today enhanced by the global society in which we live in, resulting from the increase of landscape change, wildlife exploitation (McMichael, 2001) and the increase of world population, urban areas with high concentration of people, the mobility between societies and the augmented and hyper-mobile growth of tourism (Hall, 2010). At the same time, the development of global transport networks, the agricultural intensification (McMichael, 2001) and the changes in food habits with an increase of eating super-foods, exotic foods and processed foods are proving to be excellent vectors for pathogens transmission (Labonte *et al.*, 2011; Pongsiri *et al.*, 2009). Wu et al. precisely identify areas of high risk for new infectious diseases outbreaks in the Anthropocene as:

"High-risk areas for the emergence and spread of infectious disease are where [...] wild disease reservoirs, agricultural practices that increase contact between wildlife and livestock, and cultural practices that increase contact between humans, wildlife, and live-stock [intersect] (2017:18)".

Consequently, all outbreaks of SARS (SARS-CoV), Ebola, Zika, Avian influenza and now the most impactful pandemic of COVID-19, are consequences of anthropogenic impacts caused by the human actor on non-human actors as ecosystems and biodiversity (Petersen et al., 2016). As a result, it is verifiable that the incidence rate of major pandemic outbreaks has increased. While the past century was hit by three events - the Spanish flu (H1N1) of 1918, the Asian flu (H2N2) of 1957 and the Hong Kong flu (H3N2) of 1968 - the first twenty years of the 21st century are already marked by five global pandemics – the SARS in 2002, the Avian influenza (H5N1) in 2009, the Middle East Respiratory Syndrome (Mers-CoV) in 2012, the Ebola in 2013 and the COVID-19 (SARS-CoV-2) in 2019 (Gössling et al., 2021; Coker et al., 2011).

At the beginning of this century, SARS was identified as a severe acute respiratory syndrome that began in China, with some similarities to COVID-19 virus and, therefore, deserves our attention. The SARS virus has caused a substantial impact on tourist flows in

Asia. About nine thousand people were infected with the virus and eight hundred and seventy died (McKercher & Chon, 2004). After is arise in 2002, the outbreak quickly spread globally through traveling tourists (Mason et al., 2005), reinforcing the characteristic of travel and tourism as first-rate transmission vectors of pandemic outbreaks (Nicolaides et al., 2019). For the first time in forty-five years, the World Health Organization (WHO) issued a note discouraging tourism in affected regions and recommending closing borders (Smith, 2006; Wall, 2006). Cooper (2005) noted that Japanese tourists automatically stopped traveling to destinations affected by SARS. The most affected countries like Singapore, Vietnam, China and Hong Kong lost close to \$ 20 billion dollars in GDP and three million jobs in the tourism sector (Kuo et al., 2008). Despite a rapid attempt to manage and contain the crisis, the information shared by WHO, labelling the outbreak as a "pandemic", added to the sensationalism in media coverage, led to a global panic (Mason et al., 2005; McKercher & Chon, 2004). Pandemic crises are more susceptible to negative coverage by media, inferring an extra challenge for tourist destinations to successfully manage crises (Schroeder & Pennington-Gray, 2014). The global economic cost is estimated to have reached \$ 100 billion dollars, of which \$48 billion dollars refer only to China, the destination where the outbreak emerged (McKercher & Chon, 2004).

4. THE COVID-19 PANDEMIC AND FUTURE OUTLINES FOR CRISIS MANAGEMENT

At the end of 2019, the COVID-19 virus was first identified in Wuhan region, China. It is interesting to note that it is believed that the outbreak erupted most likely in Huanan meat market, a market where species of wild and protected animals are sold as delicacies foods. Markets of this type, where wild animals often result from poaching, abound in China and have given rise to other pandemic in the past, such as SARS in 2002 (O'Callaghan-Gordo & Antó, 2020). Once again, the human actor is someway culprit of this new pandemic that put society on hold, with an unprecedented impact on the global tourism industry as travel has being considered a high-risk activity (Zheng et al., 2021).

COVID-19 is not as contagious as measles or as deadly as SARS, but it has the distinctive characteristic of having a high incubation period, assisting the virus transmission several days before symptoms start to develop (Bai et al., 2020). In addition, the virus has also a high rate of asymptomatic transmission (Li et al., 2020). After is identification in Huanan market, the virus rapidly spread to other places in China and worldwide. On Feb 2020, already 80 countries had enforced travel restrictions, borders closure, visa restrictions and flight suspensions (Kiernan & DeVita, 2020). One month later, the WHO was categorizing COVID-19 as a worldwide pandemic disease (World Health Organization, 2020). On April 2020, UNWTO reported that all main tourist destinations had implemented travel restrictions in an attempt to mitigate the COVID-19 pandemic (UNWTO, 2020), forcing them to stop their operations following lockdown measures, travel bans and cancelled bookings (Fotiadis et al., 2021). Due to COVID-19, global tourism suffered its worst year on record in 2020, with an estimated loss of USD 1.3 trillion revenues in international travel, leaving between 100 and 120 million tourism jobs at risk. This number represents more than 11 times the loss recorded during the 2009 global economic crisis (UNWTO, 2021).

The COVID-19 is already the deadliest pandemic in the Anthropocene (Fotiadis et al., 2021). At the beginning of 2021, first steps were taken towards mass vaccination, but until herd immunity is reached, we live in troubled periods of lockdowns, curfews, social distance

measures, restrictions and travel blocks. At the time of writing, COVID-19 already counted more than 147 million infections and exceeded 3 million deaths worldwide (ECDE, 2021).

We have now reached a point where we must reflect. The COVID-19 pandemic may be baptized as an 'Anthropocene disease,' underlining this new ecological era in where the human actor and his activities are pressuring the ecosystems, with painful consequences on environment, society and public health (David et al., 2021). It is important to be aware that new and more severe pandemics may arise in the near future and that the rate of new infectious diseases is likely to increase in the Anthropocene, as interaction with non-human animals, climate change and pressure on ecosystems accelerates (Stephen, 2020).

So what can be done to prepare and secure tourist destinations hit by future pandemics? The COVID-19 pandemic embodies the ideal scenario for this analysis considering the level of complexity and multi-typology of the pandemic. The features of COVID-19 have made it be classified as a combination of natural disaster, a socio-political crisis, an economic crisis and a tourism demand crisis (Zenker & Kock, 2020). To deal with this high complexity and interconnectedness, future crisis management adapted to pandemics must be able to incorporate the level of complexity of each pandemic and the destination resilience towards each outbreak. It should also be accounted the crisis typology, in order to differentiate its impacts and develop specific crisis management strategies for pandemics (Zeng, Carter & De Lacy, 2005; Miller & Ritchie, 2003). Alike COVID-19, future pandemics may request the development of preventive and control strategies to protect human heath such as social distancing measures, lockdowns or reinforce heath systems to deal with a huge burden (O'Callaghan-Gordo & Antó, 2020).

Although research on tourism crisis and disaster management has occurred, it has several limitations in terms of scope and depth. Current and future research on existing crisis management models should focus on conceptual and theoretical tests and refinements through empirical studies, fitting them to pandemic crises in tourism (Ritchie & Jiang, 2019).

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Breve currículo

Mariana De Oliveira Castanhas Casal Ribeiro

PhD Student in Tourism at the Institute of Geography and Spatial Planning of the University of Lisbon, since 2020. My PhD researches focus on crisis management models in pandemic situations, through the case study of COVID-19 in Lisbon.

My research interests are mainly focused on destination management, crisis management models, COVID-19, agente-based models, sustainable tourism development, political ecology, overtourism, tourism innovation and tourist decision-making.